

UNITED STATES DEPARTMENT OF AGRICULTURE

Farm Service Agency
Washington, DC 20250

Notice PM-2110

For: FAS, RMA, and FSA Employees

Federal Employees' Group Life Insurance (FEGLI) 1999 Open Enrollment Period

Approved by: Acting Deputy Administrator, Management



1 Overview

A

Background

Pub. L. 105-311, Federal Employees Life Insurance Improvement Act, enacted October 30, 1998, made numerous changes to the FEGLI Program. These changes were outlined in Notice PM-2103. Because of these changes, the law requires OPM to hold an open season.

B

Purpose

This notice announces the upcoming open season and provides guidance on making open enrollment elections.

2 Open Enrollment Period Details

A

Open Enrollment Period

The FEGLI 99 open enrollment period will be held from April 24, 1999, through June 30, 1999.

Continued on the next page

Disposal Date

January 1, 2000

Distribution

All FAS, RMA, and FSA employees; State Offices relay to County Offices

2 Open Enrollment Period Details (Continued)

B

FEGLI Materials

All FEGLI open enrollment period materials and forms will be available on OPM's web site at <http://www.opm.gov/insure/life> on or before April 24, 1999.

All employees shall receive:

- RI 76-21, FEGLI Booklet
- FE 74 A, FEGLI 99 Open Enrollment Period Pamphlet.

Note: The booklet and pamphlet are available in versions for the visually impaired. Contact your servicing personnel office if you need a copy.

There has been a delay receiving open season materials because of a last minute printing change. Employees will be notified when materials are received. Until then employees are encouraged to access materials from the above web site.

C

FEGLI Calculator

The FEGLI calculator is an online, interactive calculator that allows users to:

- determine the face value of FEGLI life insurance
- calculate amount paid for coverage
- see how choosing different options can change the amount of life insurance and premium withholdings
- see how the life insurance carried into retirement will change over time.

Access the calculator at <http://apps.opm.gov/calculator/index.htm>.

Continued on the next page

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2 Open Enrollment Period Details (Continued)

D

Satellite Broadcast

There will be a live satellite broadcast for all employees on FEGLI on Wednesday, May 12, 1999, from 1 p.m. to 2 p.m. E.S.T.

This program will provide information about the life insurance program and the opportunity employees have to enroll or change coverage during the 1999 special open enrollment period.

The coordinates for the broadcast are provided in this table.

IF receiving sites use...	THEN settings are...
C-Band	GE-2 Transponder 18 85 Degrees West Downlink Frequency 4060 MHZ Polarity - Horizontal Audio Frequency: 6.2 & 6.8
KU Band	Telstar 5 Transponder 11 97 Degrees West Downlink Frequency 11898.0 MHZ Polarity-Vertical Audio Frequency: 6.2 & 6.8

Note: Video tapes will also be available.

E

National Office Contact

National Office employees shall contact the appropriate office according to this table for information.

IF employee needs to...	THEN employee shall do 1 of the following...
submit RI 76-27 (Exhibit 1) or other life insurance forms	<ul style="list-style-type: none">place in HRD mailbox in Room 0419-Southdeliver to Room 5700, L Streetcontact the Services Unit on 202-418-9135.
obtain policy information or guidance	<ul style="list-style-type: none">go to Room 5700, L Streetcontact the Performance Management, Benefits, and Awards Branch (PMBAB) at 202-418-9021 or 202-418-9039, TDD 202-418-9116.

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2 Open Enrollment Period Details (Continued)

F

Field Offices Contact

Field Office employees shall contact the appropriate office according to this table for additional information.

Location	Contact
<ul style="list-style-type: none">KCMOKCCOAPFORMA Kansas City OfficesSt. Louis	Servicing Processing Technician, Processing Section, Personnel Division, KCMO at 816-926-6225
RMA RSO's and Compliance Field Offices	HRD/PMBAB at 202-418-9021 or 202-418-9039, TDD 202-418-9116
FAS Overseas employees	HRD/PMBAB at 202-418-9021 or 202-418-9039, TDD 202-418-9116
State Office	Administrative Division
County Office	CED

3 Participation in Open Enrollment Period

A

Active Employees

All active employees are eligible to participate, except those who are in a position that is excluded from FEGLI coverage by law or regulation.

B

Annuitants

Annuitants cannot participate in the open enrollment period unless they are re-employed in a position in which they are eligible for coverage.

Continued on the next page

3 Participation in Open Enrollment Period (Continued)

C

Compensationers

Compensationers who are insured as compensationers cannot participate in the open enrollment period.

Compensationers who are still insured as employees (that is, during the first 12 months in nonpay status) can participate in the open enrollment period on the same basis as other employees in nonpay status. See subparagraph D.

Compensationers who are re-employed on a part-time basis are also eligible to participate, unless the position is excluded by law or regulation.

D

Employees in Nonpay Status

Employees in nonpay status may participate in the open enrollment period. However, any coverage elected cannot become effective until the employee returns to pay and duty status.

Exception: Employees who are entitled to continue benefits while on leave without pay to work full-time for employee organizations, detailed to international organizations, or on temporary assignment to State, local, and Indian tribal governments, institutions of higher education, and other organizations eligible under the Intergovernmental Personnel Act of 1970 do not have to return to pay and duty status with their Federal agency. However, these employees must meet the pay and duty status requirements at their current employment site and must provide proof that they meet these requirements before any coverage elected during the open enrollment period can become effective.

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4 Elections and Effective Dates

A

Elections

Employees can elect any and all coverage for which they are eligible.

B

Positive Re-enrollment

Positive re-enrollment is **not** required during this open enrollment period. Only employees who want to change coverage should complete an enrollment form.

An employee who takes no action during the open enrollment period will keep the same coverage the employee had before the open enrollment period.

C

Making an Open Enrollment Election

Employees shall use RI 76-27, the special FEGLI 99 Open Enrollment Period Election Form (Exhibit 1), to make open enrollment elections. **Employees cannot use SF-2817 to make FEGLI 99 open enrollment period elections.** Refer to subparagraphs 2 E and F to determine where to submit life insurance forms.

Note: It is important to note that employees making an open enrollment period election must complete RI 76-27 indicating **all** coverage they wish to have, not just the new coverage. **Any coverage not shown on RI 76-27 will be considered to have been waived.**

D

Effective Date of Coverage

Coverage elected during the FEGLI 99 open enrollment period becomes effective the first pay period beginning on or after April 23, 2000, which follows a pay period during which the employee was in pay and duty status.

Continued on the next page

4 Elections and Effective Dates (Continued)

E
**Required Pay
 and Duty Status
 for Elected
 Coverage to
 Become Effective**

IF enrollee is...	THEN the employee...
a full-time employee	must be in pay and duty status for 32 hours during the pay period before the one in which the coverage is to become effective.
a part-time employee	must be in pay and duty status for one-half of the regularly scheduled tour of duty shown on the employee's current SF-50.
an intermittent employee or an employee without a regularly scheduled tour of duty	must be in pay and duty status for one-half of the hours customarily worked in a pay period. Employing offices can determine the number of hours customarily worked by totaling the number of hours worked in the calendar year quarter ending April 30, 1999, and dividing that by the number of pay periods in that quarter.

F
**Paying
 Premiums for
 Elected Coverage**

Employees do not begin paying premiums for new coverage elected during the open enrollment period until the effective date in 2000.

5 Election Opportunities

A
**Reviewing
 Election
 Opportunities**

Employees should refer to Exhibit 2, Election Opportunities, for a description of election opportunities, the appropriate enrollment form, and the effective date of coverage.

Continued on the next page

5 Election Opportunities (Continued)

B

**Separating and
Retiring
Employees With
a Pending Open
Enrollment
Election**

Separating or retiring employees who have an open enrollment election pending should refer to Exhibit 3, Separations and Pending Open Enrollment Election, to determine what happens to coverage at the time of separation or retirement.

C

**Changing an
Open Enrollment
Election**

An employee may change an open enrollment election at any time during the open enrollment period by submitting a revised RI 76-27.

After the open enrollment period is over, an employee shall notify the employing office in writing, if the employee decides to void the open enrollment election. The employee **cannot** make a new election at this time, however; the employee will keep current FEGLI coverage, unless the employee chooses to cancel some or all of that coverage.

D


**Continuing
Newly Elected
Coverage After
Retiring or
Becoming
Insured as a
Compensationner**

The FEGLI 99 open enrollment period is **not** considered the first opportunity for electing coverage. Therefore, an employee must have the newly elected coverage for 5 years before retiring or starting to receive compensation to continue coverage as an annuitant or compensationner.

Note: For most employees, FEGLI 99 **will** be their first opportunity to elect 2 to 5 multiples of Option C coverage. Therefore, employees who elect these multiples of Option C and retire after the coverage becomes effective will be eligible to continue the coverage as long as they meet the 5-year requirement for previous Option C coverage.

RI 76-27, FEGLI '99 Open Enrollment Period Election Form

The following is a sample of RI 76-27. The form is currently available on OPM's web site at <http://www.opm.gov/insure/life>. Employees will be notified when printed forms are available.

 FEGLI '99 Open Enrollment Period Election Form Federal Employees' Group Life Insurance Program																	
<p>1 Instructions Use this form ONLY for Open Enrollment Period elections during the FEGLI '99 Open Enrollment Period from April 24 – June 30, 1999. Use SF 2817, <i>Life Insurance Election</i>, for all other elections and all waivers of coverage.</p> <ul style="list-style-type: none"> • Read the back of Part 3 — Employee Copy carefully. • Give your completed form to your human resources office. • Do not separate the parts. Your human resources office will complete the form and return your copy to you. <p>This election supersedes all previous elections. Be sure you sign for ALL coverage you wish to have — not just for the new coverage you wish to elect during this open enrollment period.</p>																	
<p>2 Effective date New coverage you elect during this open enrollment period will be effective on the first day of your first pay period that begins on or after April 23, 2000, which immediately follows one in which you were at work in a pay status for at least 32 hours for full-time employees. If you are a part-time employee, you must have been at work in a pay status for one-half of the regularly scheduled tour of duty (TOD) shown on your current SF 50. If you are on an intermittent schedule or do not have a regularly scheduled TOD, you must have been at work in a pay status for one-half of the hours you customarily work. The new coverage will not be used in calculating any benefits payable before that effective date.</p>																	
<p>3 Fill in identifying information about yourself</p> <table border="1"> <tr> <td>Name (Last)</td> <td>(First)</td> <td>(Middle)</td> <td>Date of birth (mm/dd/yyyy)</td> <td>Social Security Number</td> </tr> <tr> <td colspan="3">Employing department or agency</td> <td colspan="2">Department or agency location where you work (City, state, ZIP Code)</td> </tr> </table>			Name (Last)	(First)	(Middle)	Date of birth (mm/dd/yyyy)	Social Security Number	Employing department or agency			Department or agency location where you work (City, state, ZIP Code)						
Name (Last)	(First)	(Middle)	Date of birth (mm/dd/yyyy)	Social Security Number													
Employing department or agency			Department or agency location where you work (City, state, ZIP Code)														
<p>4 Basic To elect or retain Basic, sign and date below. If you do not sign for Basic, you may not elect or retain any form of Optional insurance. I want Basic. I authorize deductions to pay my share of the cost. (Basic may be provided without cost to Postal Service employees.) Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.) Date (mm/dd/yyyy)</p>																	
<p>5 Optional If you signed for Basic in Item 4 on this form, you may elect or retain any or all of the following options. Sign the box(es) below for any option(s) you wish to elect or retain. You will not be covered for any option(s) for which you do not sign below, regardless of whether you previously elected the option(s).</p> <table border="1"> <thead> <tr> <th>Option A — Standard</th> <th>Option B — Additional</th> <th>Option C — Family</th> </tr> </thead> <tbody> <tr> <td>I want Option A. I authorize deductions to pay the full cost.</td> <td>I want Option B in the multiple of my annual basic pay I indicate below. I authorize deductions to pay the full cost.</td> <td>I want Option C in the multiple I indicate below. I understand that each multiple is worth \$5,000 upon the death of my spouse, and \$2,500 upon the death of an eligible child. I authorize deductions to pay the full cost.</td> </tr> <tr> <td></td> <td> <input type="checkbox"/> 1 times my pay <input type="checkbox"/> 2 times my pay <input type="checkbox"/> 3 times my pay <input type="checkbox"/> 4 times my pay <input type="checkbox"/> 5 times my pay </td> <td> <input type="checkbox"/> 1 multiple <input type="checkbox"/> 2 multiples <input type="checkbox"/> 3 multiples <input type="checkbox"/> 4 multiples <input type="checkbox"/> 5 multiples </td> </tr> <tr> <td>Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)</td> <td>Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)</td> <td>Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)</td> </tr> <tr> <td>Date (mm/dd/yyyy)</td> <td>Date (mm/dd/yyyy)</td> <td>Date (mm/dd/yyyy)</td> </tr> </tbody> </table>			Option A — Standard	Option B — Additional	Option C — Family	I want Option A. I authorize deductions to pay the full cost.	I want Option B in the multiple of my annual basic pay I indicate below. I authorize deductions to pay the full cost.	I want Option C in the multiple I indicate below. I understand that each multiple is worth \$5,000 upon the death of my spouse, and \$2,500 upon the death of an eligible child. I authorize deductions to pay the full cost.		<input type="checkbox"/> 1 times my pay <input type="checkbox"/> 2 times my pay <input type="checkbox"/> 3 times my pay <input type="checkbox"/> 4 times my pay <input type="checkbox"/> 5 times my pay	<input type="checkbox"/> 1 multiple <input type="checkbox"/> 2 multiples <input type="checkbox"/> 3 multiples <input type="checkbox"/> 4 multiples <input type="checkbox"/> 5 multiples	Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)	Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)	Signature (Do not print. Only you may sign. Signatures by guardians, conservators or through a power of attorney are not acceptable.)	Date (mm/dd/yyyy)	Date (mm/dd/yyyy)	Date (mm/dd/yyyy)
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Date (mm/dd/yyyy)	Date (mm/dd/yyyy)	Date (mm/dd/yyyy)															
<p>6 To be completed by agency. Remarks:</p> <table border="1"> <tr> <td>Name and address of human resources office</td> <td>Date received in human resources office (mm/dd/yyyy)</td> <td>Effective date of coverage (mm/dd/yyyy)</td> </tr> <tr> <td colspan="3">I followed the instructions on the back of Part 1.</td> </tr> <tr> <td colspan="3">Signature of authorized agency official</td> </tr> </table>			Name and address of human resources office	Date received in human resources office (mm/dd/yyyy)	Effective date of coverage (mm/dd/yyyy)	I followed the instructions on the back of Part 1.			Signature of authorized agency official								
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Signature of authorized agency official																	
<p>The employee's copy of this form, when completed by the human resources office, together with the FEGLI Booklet (RI 76-21 or RI 76-20 for Postal Service employees) constitute the employee's Certificate of Insurance.</p> <p>RI 76-27 April 1999</p> <p>PART 1 — File in Official Personnel Folder</p>																	

Election Opportunities

FEGLI election opportunities are outlined in this table.

IF the employee...	AND the employee...	THEN the employee may elect...	Time Limit	Complete	Effective Date
whose appointment permits FEGLI coverage, has waived all or any coverages , including re-hires during open enrollment period who have an uncanceled waiver	is on the rolls during the open enrollment period , April 24, 1999, through June 30, 1999	basic and any or all optional coverages.	April 24, 1999, through June 30, 1999	RI 76-27, FEGLI Open Enrollment Period Election Form	First day of pay period 9, CY2000 provided employee meets pay and duty status requirements during preceding pay period
has BASIC and any or all FEGLI coverages (Basic and all options)	is on the rolls during the open enrollment period , April 24, 1999, through June 30, 1999	any or all optional coverages, including additional multiples of Option C.	April 24, 1999 through June 30, 1999	RI 76-27, FEGLI Open Enrollment Period Election Form <u>1/</u>	First day of pay period 9, CY 2000 provided employee meets pay and duty status requirements during preceding pay period

1/ Open Enrollment forms must be completed to include all coverages the employee wants, that is, Basic, Standard Option (A), Additional Option (B) and Family Option (C). For example, the employee has Basic and Option A and wants to add 5 multiples of Option B during the Open Enrollment Period. The employee must complete the form to show that Basic, Option A and 5 multiples of B are elected.

Continued on the next page

Election Opportunities (Continued)

IF the employee...	AND the employee...	THEN the employee may elect...	Time Limit	Complete	Effective Date
was enrolled for Option C (Family) before June 24, 1999	between October 30, 1998 through April 23, 1999, experienced a qualifying life event that is, marries, acquires an eligible child or children, divorces, or spouse dies	multiples of Option C up to number of eligible family members acquired by event, or for death or divorce, up to the number of eligible children (Employee may not now elect Option B or increase Option B based on this event; Option B elections must have been made within 60 calendar days of the event)	Within 60 calendar days after April 24, 1999	SF 2817 (1999 version) <u>2/</u> Note: Employee may submit RI 76-27 to enroll for coverage over that permitted by event (RI 76-27 must show all coverages employee wants and is eligible for)	Retroactive to the first day of pay period 8 (which includes April 24, 1999) Employee's open enrollment election effective in pay period 9 of CY 2000, provided employee meets pay and duty status requirements
An employee is newly hired or converted to an appointment permitting FEGLI coverage <u>3/</u>	Appointment or conversion is effective April 24, 1999, or later	Option A and up to 5 multiples of Options B and C (automatically has Basic, unless waived; if waived, cannot have Options)	Within 31 calendar days after appointment or conversion	SF 2817 (1999 version)	First day of pay and duty status after employing office receives SF 2817

2/ SF 2817 must show all coverages the employee wants and is eligible for, not just the additional multiples of Option C.

3/ If the employee had a prior waiver of Basic or Options the employee must separated for more than 180 calendar days for the prior waiver to be canceled automatically. If the waiver is not canceled because of separation of 180 calendar days or less, the employee must show proof of insurability to obtain Basic and Standard Option (A) and Additional Optional (B). Employees, insured for Basic, may elect or increase Additional Optional or Family Option if they have a qualifying event.

Continued on the next page

Election Opportunities (Continued)

IF the employee...	AND the employee...	THEN the employee may elect...	Time Limit	Complete	Effective Date
is covered for Basic, but not for Option C , or for all multiples of Option C	experiences a qualifying event that is, marriage, birth or other acquisition of an eligible child, divorce, or death of spouse) April 24, 1999 or later	Option C (and/or Option B) in multiples up to the number of dependents obtained as a result of the event, or in case of death of spouse or divorce, the number of eligible children Note: Foster children count for electing Option C, but not in electing Option B.	Within 60 calendar days of qualifying event	SF 2817 (1999 version)	For Option B, the first day of pay and duty status on or after employing office receives SF 2817. For Option C, the day the employing office receives the election, or the date of the event, whichever is later.

Continued on the next page

Election Opportunities (Continued)

IF the employee...	AND the employee...	THEN the employee may elect...	Time Limit	Complete	Effective Date
is not enrolled in Basic, or enrolled in Basic, but not in Options A, B, and/or C	submits an approved SF 2822 to the employing office because of a qualifying event or having a physical exam	to enroll in Option A and up to 5 multiples of Option B, but may not enroll in Option C, unless there has been a qualifying event that would permit election of Option C Note: Enrollment in Basic is automatic, if not already enrolled.	Within 31 calendar days of date of approval by OFEGLI.	SF 2817 (1999 version)	Enrollment in Basic will be effective the first day of pay and duty status on or after the request for coverage is approved. Enrollment in Options A and B is effective the first day of pay and duty status on or after the date request is approved and the employing office receives SF 2817 electing coverage.
enrolled	wants to cancel coverage as an open enrollment election	to cancel Basic and/or optional coverage.	April 24, 1999 through June 30, 1999	RI 76-21	First day of pay period 9 CY 2000 (which includes April 24, 1999)
enrolled	wants to cancel coverage	to cancel Basic and/or any option.	Anytime (unless insurance has been assigned)	SF 2817	Last day of pay period in which submitted

Separations and Pending Open Enrollment Election

A**Retirement or
Resignation**

If an employee elected coverage, or a change in coverage, during the open enrollment period and retires or resigns before new coverage becomes effective, the employee may elect to take coverages enrolled in before the open enrollment period into retirement provided usual requirements are met.

B**Transfers**

If an employee elected coverage, or a change in coverage, during the open enrollment period and transfers to a different agency before the open enrollment election becomes effective, the effective date for the election will be the first day of pay period 9, which includes April 23, 2000, following a pay period during which the employee was in pay and duty status the required amount of time.

C**Employee or
Covered Family
Member Dies**

If an employee elected coverage during the open enrollment period, and the employee or a covered family member dies **before** coverage becomes effective, the survivors would be ineligible for coverage elected before it becomes effective.
